**INFORMATIONAL LETTER NO.1619-MC** 

**DATE:** March 21, 2016

**TO**: Iowa Medicaid Hospitals, Physicians, Dentists, Podiatrists, Optometrists,

Opticians, Pharmacy, Home Health Agency, Independent Lab, Ambulance, Medical Supply Dealers, Clinics, Rural Health Clinics, Chiropractors, Audiologists, Skilled Nursing Facilities, Rehab Agency, Intermediate Care Facilities, Community Mental Health Center, Mental Hospitals, Community Based ICF/MR, Psychologists, Hearing Aid Dealers, Orthopedic Shoe Dealers, Ambulatory Surgical Centers, Certified Registered Nurse Anesthetists, Hospice, Clinical Social Workers, Federally Qualified Health Centers, Nursing Facility-Mental III

and Advanced Register Nurse Practitioner Providers and Managed Care

Organizations (MCOs)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** Medicare Crossover Claims-Coordination of Benefits (COB) with MCOs

**EFFECTIVE:** April 1, 2016

The IA Health Link managed care program will begin on April 1, 2016.

Effective for dates of service on or after April 1, 2016, all Medicare crossover claims for MCOenrolled members will become the responsibility of the member's MCO. This includes both claims from Medicare Advantage Plans and traditional Medicare.

The MCOs will not have the automated crossover process up and running until the end of June 2016. The MCOs will need to complete approximately three months of testing before Medicare crossover claims are approved to be sent automatically from Medicare to the MCOs for processing.

During this three-month testing period, the IME will continue to receive claims from Medicare; however, the IME will issue a denial for any COB crossovers for MCO-enrolled members. It will be the provider's responsibility to submit the crossover claim to the appropriate MCO for reimbursement. Once testing is completed by the MCO, crossover claims will be sent automatically by Medicare to the MCO.

During this three-month testing period all three MCOs will accept crossover claims in both standard electronic and paper formats, using the standard claim submission process outlined in their provider manuals.

- Electronic/EDI claim submissions with COB data segments that are completed by the provider will be accepted or
- Paper claim submissions with the Medicare EOB attached.

## Amerigroup lowa

Mail Paper Claims to: Amerigroup Claims P.O. Box 61010 Virginia Beach, VA 23466-1010

Please consult the Amerigroup Iowa Provider Manual<sup>1</sup> for additional information. Specifically, see page 93 for instructions related to submitting electronic and paper claims.

Call Amerigroup Iowa Provider Services at 1-800-454-3730 with additional guestions.

## **AmeriHealth Caritas Iowa**

Mail Paper Claims to: AmeriHealth Caritas Iowa Attn: Claims Processing Department P.O. Box 7113 London, KY 40742

Please consult the AmeriHealth Caritas Claims and Billing Manual<sup>2</sup> for additional information. Specifically, see page 2 for instructions related to submitting electronic and paper claims.

Call AmeriHealth Caritas Iowa Provider Services at 1-844-411-0579 with additional questions.

## <u>UnitedHealthcare Plan of the River Valley, Inc.</u>

Mail Paper Claims to: UnitedHealthcare Community Plan PO Box 5220 Kingston, NY 12402-5220

Please consult the UnitedHealthcare Provider Manual<sup>3</sup> for additional information. Specifically, see page 41, Section 11.11 for instructions related to submitting electronic and paper claims.

Call UnitedHealthcare Provider Services at 1-888-650-3462 with additional guestions.

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909 or email imeproviderservices@dhs.state.ia.us.

http://providers.amerigroup.com/ProviderDocuments/IAIA ProviderManual.pdf

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